|   | PATEN   | T-APPLICAT<br>Effe                        | ION FEE            | ,                                    | Applicat    | ion or<br>/ <i>O</i> {           | S490   | imber                                   |                        |         |                              |  |  |  |
|---|---|---|--------------------|--------------------------------------|-------------|----------------------------------|--------|---|------------------------|---------|------------------------------|--|--|--|
| CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE OR SMALL ENTITY |   |   |                    |                                      |             |                                  |        |   |                        |         |                              |  |  |  |
| 1   | OTAL CLAIM  | IS  | 29                 | 29                                   |             |                                  |        | BATE                                    | FEE                    | 67      |                              |  |  |  |
| F   | OR  |   |                    | NUMBER FILED                         |             | NUMBER EXTRA                     |        | BASIC F                                 |                        |         | RATE<br>BASIC FE             | FEE 740.00                                       |  |  |
| 7   | OTAL CHARGE   | EABLE CLAIMS                              | 2.9 minus 20=      |                                      | . 9         |                                  | 1      | X\$ 9=                                  | _                      | 7       | -                            | 1  |  |  |
| ┕   | DEPENDENT   |   | 3                  | 3 minus 3 =                          |             | _                                |        | X42=                                    | +-                     | - 0     | Va.                          | <del>                                     </del> |  |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   |   |                    |                                      |             |                                  |        |   | +-                     | - 0     | `                            | <del> </del>                                     |  |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2                    |   |   |                    |                                      |             |                                  |        | .+140=                                  |                        | OF      | +280=                        |  |  |  |
| CLAIMS AS AMENDED - PART II   |   |   |                    |                                      |             |                                  |        |   | TOTAL OR TOTAL         |         |                              |  |  |  |
| (Column 1) (Column 2) (Column 3)  |   |   |                    |                                      |             |                                  |        | OTHER THAN SMALL ENTITY OR SMALL ENTITY |                        |         |                              |  |  |  |
| AMENDMENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENOMENT |                    | HIGH<br>NUME<br>PREVIO<br>PAID F     | BER         | PRESENT<br>EXTRA                 |        | RATE                                    | ADDI-<br>TIONA<br>FEE  |         | RATE                         | ADDI-<br>TIONAL<br>FEE                           |  |  |
|   | Total   | .33                                       | Minus              | -2                                   | 9           | -4                               | П      | X\$ 9=                                  | #36                    | OR      | X\$18=                       | -  |  |  |
| ₹   | FIRST PRES  | ENTATION OF M                             | Minus              | EPENDENT                             | <u> </u>    | -2                               | l      | x423                                    | 86                     | OR      | XXI-                         |  |  |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |   |                    |                                      |             |                                  |        |   | 1. 190                 | 4       | +280                         | 1  |  |  |
| TOTAL COL COS TOTAL   |   |   |                    |                                      |             |                                  |        |   |                        |         |                              |  |  |  |
| (Column 1) (Column 2) (Column 3)  |   |   |                    |                                      |             |                                  |        |   |                        |         |                              |  |  |  |
| AMENDMENT B   |   | REMAINING<br>AFTER<br>AMENDMENT           |                    | HIGHE<br>NUMBI<br>PREVIOL<br>PAID FI | ER<br>JSLY  | PRESENT<br>EXTRA                 |        | RATE                                    | ADDI-<br>TIONAL<br>FEE | اً ا    | RATE                         | ADDI-<br>TIONAL                                  |  |  |
| ב<br>ב  | Total   | •   | Minus              |                                      |             |                                  |        | X\$ 9=                                  | /                      | OR      | X\$18=                       | FEE  |  |  |
|   | Independent   | NTATION OF MI                             | Minus              | ***                                  |             |                                  |        | X42=                                    | # . ****               | .,,,,   | X84=                         |  |  |  |
|   | THOTPHESE   | ENTATION OF MI                            | JUNIPLE DE         | PENDENT                              | LAIM        |                                  |        | +140=                                   | <u> </u>               | OR      |                              |  |  |  |
|   |   |   |                    |                                      |             |                                  | L      | TOTAL                                   |                        | OR      | +280=<br>TOTAL               |  |  |  |
|   | · -~.17.  | (Column 1)                                |                    | Column                               |             | Oak a)                           | AC     | OIT. FEE                                |                        | OR      | ADDIT. FEE                   |  |  |  |
|   | CCAIMS HIGHEST  |   |                    |                                      |             |                                  |        |   |                        |         |                              |  |  |  |
|   | Total   | AFTER<br>AMENDMENT                        |                    | PREVIOU<br>PAID FO                   | SLY         | PRESENT<br>EXTRA                 | Ŀ      | RATE                                    | ADDI-<br>TIONAL<br>FEE |         | RATE                         | ADDI-<br>TIONAL<br>FEE                           |  |  |
|   | Independent   | •   | Minus              | **                                   |             |                                  |        | K\$ 9=                                  |                        | OR      | X\$18=                       |  |  |  |
|   |   | NTATION OF MU                             | Minus<br>LTIPLE DE | PENDENT                              | 1 4124      |                                  |        | X42=                                    |                        | OR      | X84=                         |  |  |  |
|   |   | 1.  | 140≃               |                                      | OR          | +280=                            | $\neg$ |   |                        |         |                              |  |  |  |
| ;;  | the entry in colur<br>the "Highest Nur<br>the "Highest Nur<br>he "Mighest Nur | TOTAL<br>SIT. FEE                         |                    | OR A                                 | TOTAL       |                                  |        |   |                        |         |                              |  |  |  |
| T   | he "Highest Num   | ber Previously Paid                       | For" (Total o      | r independent)                       | is the h    | s, enter "3,"<br>ighest number i | found  | to the app                              | ropriate box           | in colu | DDIT. FEE <b>L.</b><br>mn 1. |  |  |  |
| _   | PTO-875 (Rev. 8/0   |   |                    |                                      |             | · · ·                            |        |   |                        |         |                              |  |  |  |
|   |   |   |                    | Rusc                                 | 300 S001 44 | 1-124/10107                      |        |   | WHOSE U.               | LUEPA   | RTMENT OF C                  | DMMERCE  |  |  |